

STATE OF OREGON  
WATER WELL REPORT  
(as required by ORS 537.765)

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1083

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APR - 3 1995

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67896

WATER RESOURCES DEPT. (START CARD) #

Instructions for completing this report are on the last page of this form.

SALEM, OREGON

(1) OWNER: Well Number \_\_\_\_\_  
Name MONTY CRUM  
Address BOX 121  
City LONG State OR Zip 97843

(2) TYPE OF WORK  
 New Well  Deepening  Alteration (repair/recondition)  Abandonment

(3) DRILL METHOD:  
 Rotary Air  Rotary Mud  Cable  Auger  
 Other \_\_\_\_\_

(4) PROPOSED USE:  
 Domestic  Community  Industrial  Irrigation  
 Thermal  Injection  Livestock  Other \_\_\_\_\_

(5) BORE HOLE CONSTRUCTION:  
Special Construction approval  Yes  No Depth of Completed Well 407 ft.  
Explosives used  Yes  No Type \_\_\_\_\_ Amount \_\_\_\_\_

HOLE		SEAL				
Diameter	From	To	Material	From	To	Sacks or pounds
See PREVIOUS LOG						

How was seal placed: Method  A  B  C  D  E  
 Other \_\_\_\_\_  
Backfill placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Material \_\_\_\_\_  
Gravel placed from \_\_\_\_\_ ft. to \_\_\_\_\_ ft. Size of gravel \_\_\_\_\_

(6) CASING/LINER:

	Diameter	From	To	Gauge	Steel	Plastic	Welded	Threaded
Casing:					<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Liner:	0	367	25		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>

Final location of shoe(s) \_\_\_\_\_

(7) PERFORATIONS/SCREENS:

From	To	Slot size	Number	Diameter	Material	Telephone size	Casing	Liner
367	407	.25		12"	CARBON Fc		<input type="checkbox"/>	<input type="checkbox"/>

(8) WELL TESTS: Minimum testing time is 1 hour

Yield gal/min	Drawdown	Drill stem at	Flowing Artesian	Time
	NA		<input type="checkbox"/>	1 hr.

Temperature of water \_\_\_\_\_ Depth Artesian Flow Found \_\_\_\_\_  
Was a water analysis done?  Yes By whom \_\_\_\_\_  
Did any strata contain water not suitable for intended use?  Too little  
 Salty  Muddy  Odor  Colored  Other \_\_\_\_\_  
Depth of strata: \_\_\_\_\_

(9) LOCATION OF WELL by legal description:  
County Gilliam Latitude \_\_\_\_\_ Longitude \_\_\_\_\_  
Township 13 N or S Range 22E E or W. WM.  
Section 10 SW 1/4 \_\_\_\_\_ 1/4 \_\_\_\_\_  
Tax Lot 300 Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Street Address of Well (or nearest address) \_\_\_\_\_

(10) STATIC WATER LEVEL:  
162 ft. below land surface. Date 3-25-95  
Artesian pressure \_\_\_\_\_ lb. per square inch. Date \_\_\_\_\_

(11) WATER BEARING ZONES:

Depth at which water was first found NA

From	To	Estimated Flow Rate	SWL
NA			

(12) WELL LOG:  
Ground Elevation \_\_\_\_\_

Material	From	To	SWL
NA			
Some 1/4" GELU PIPE IN BOTTOM WHICH IS PART THE BEST ACQUIFER			

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MAR 27 1995

WATER RESOURCES DEPT.  
SALEM, OREGON

Date started 3-20-95 Completed 3-24-95

(unbonded) Water Well Constructor Certification:  
I certify that the work I performed on the construction, alteration, or abandonment of this well is in compliance with Oregon water supply well construction standards. Materials used and information reported above are true to the best of my knowledge and belief.  
Signed PERRY STORHAMP WWC Number 1532  
Date 3-24-95

(bonded) Water Well Constructor Certification:  
I accept responsibility for the construction, alteration, or abandonment work performed on this well during the construction dates reported above. All work performed during this time is in compliance with Oregon water supply well construction standards. This report is true to the best of my knowledge and belief.  
Signed Larry Burch WWC Number 544  
Date 3-24-95